


02/02/01 11033 U.S. PTO

02-05-01

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PTO/SB/05 (08-00)

App. for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No. LUC-296/Foss 1-8-25-5	
	First Inventor or Application Identifier Foss	
	Title DIRECT ELECTRICAL CONNECTABILITY OF PORT OF SPLITTER UNIT TO CONNECTOR OF INTERFACE CIRCUIT OF SWITCH	
	Express Mail Label No. EL041358353US	

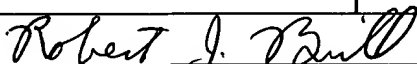
<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning design patent application contents.</i>	<b>ADDRESS TO</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 21] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) [Total Sheets 6]	<b>ACCOMPANYING APPLICATIONS PARTS</b>	
5. Oath or Declaration [Total Pages 7] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 17 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	<input checked="" type="checkbox"/> Power of Attorney
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Copies of IDS Citations
	11. <input type="checkbox"/> English Translation Document (if applicable)	
	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	
	13. <input type="checkbox"/> Preliminary Amendment	
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
	16. <input checked="" type="checkbox"/> Other: Certificate of Express Mail	

17. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation    ☐ Divisional    ☐ Continuation-in-part (CIP)    of prior application No: \_\_\_\_ /  
Prior application information: Examiner \_\_\_\_    Group / Art Unit: \_\_\_\_

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>17. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label			<input checked="" type="checkbox"/> Correspondence address below		
(Insert Customer No. or Attach bar code label here)					
Name	Carmen B. Patti/Robert J. Brill				
	Wildman, Harrold, Allen & Dixon				
Address	225 West Wacker Drive				
City	Chicago	State	IL	Zip Code	60606
Country	USA	Telephone	312/201.2000	Fax	312/201.2555

Name (Print/Type)	Robert J. Brill	Registration No. (Attorney/Agent)	36,760
Signature		Date	February 2, 2001

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

TOTAL AMOUNT OF PAYMENT (\$ ) 782

Application Number N/A  
Filing Date February 2, 2001  
First Named Inventor Foss  
Examiner Name N/A  
Group / Art Unit N/A  
Attorney Docket No. LUC-296/Foss 1-8-25-5

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit  
Account  
Number

12-2325

Deposit  
Account  
Name

Lucent Technologies, Inc.

☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status.  
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money  
Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	710.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1)

(\$ ) 710

### 2. EXTRA CLAIM FEES

Total Claims	24	-20**	=	4	Extra Claims	X	18	=	72	Fee Paid
Independent Claims	2	-3**	=	0	Fee below	X	0	=	0	
Multiple Dependent						X			0	

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ ) 72

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	130	123	130	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ ) 0

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Robert J. Brill	Registration No. Attorney/Agent)	36,760	Telephone	312/201.2000
Signature	<i>Robert J. Brill</i>			Date	February 2, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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 133. *Chlorophyll acw* (Chl *acw*)  
 134. *Chlorophyll*

## CERTIFICATE OF MAILING

Dear Sirs:

**New Application Transmittal**  
**Fee Transmittal Sheet**  
**21-page Specification, Claims, Abstract**  
**6-sheets Informal Drawings**  
**7-page Executed Declaration and Power of Attorney**  
**Recordation Form Cover Sheet w/copy for fees**  
**5-page Executed Assignment**  
**3-page IDS**  
**1-copy of each of 18 cited references**  
**Return Receipt Postcard**

Signature: